

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 346  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Association of Mutual Insurance Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gregg Cornell**

Mailing Address 6101 Anacapri Blvd

City State Zip Code  
 Lansing MI 48917-3968

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Auto-Owners Insurance Company

Occupation  
 Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 05 / 2011

**Transaction ID : 25CA5B4BBCEA9881632**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Connie Costigan**

Mailing Address 33305 E Truman Rd

City State Zip Code  
 Grain Valley MO 64029-8245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CFM Insurance, Inc.

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

09 / 29 / 2011

**Transaction ID : 3B55CC388CF071784C6**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey Couchman**

Mailing Address PO Box 1463

City State Zip Code  
 Minneapolis MN 55440-1463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Western National Mutual Insurance Comp

Occupation  
 Vice President of Marketing & Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 05 / 2011

**Transaction ID : D7815934BD225AD4D2E**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1310.00